

**Georgia Department of Human Resources Division of Aging Services  
Requirements for Non-Medicaid Home and Community Based Services**

**Section 300                      Individual Service Requirements**

**§306 Homemaker Service Requirements**

**June 2002**  
**Revised 11/2002**

**§306.1 Purpose**

This chapter establishes the requirements to be followed when Area Agencies on Aging provide or contract for the provision of homemaker services to frail elderly people in their places of residence.

**§306.2 Scope**

These requirements apply to homemaker services funded in whole or in part with non-Medicaid federal and state funds<sup>1</sup>, managed by Area Agencies, and any associated matching funds. The services are provided to or on behalf of eligible persons in their places of residence. The provision of homemaker services does not include the provision of personal care services. (See §308, "Personal Care Service Requirements.")

**§306.3 Target group**

The target group for this service is persons 60 years of age or older, who are functionally impaired in their ability to perform regular activities of daily living and instrumental activities of daily living related to maintaining the home.

**§306.4 Client eligibility**

- (a) Eligible individuals meet the following criteria:
  - (1) are age 60 and over; and
  - (2) have a physical or mental disability or disorder which restricts his/her ability to perform basic activities of daily living and/or instrumental activities of daily living, or which threatens his/her capacity to live independently; and
  - (3) do not have sufficient access to persons who are able and/or willing to assist with or perform needed basic and instrumental activities of daily living or provide adequate support to enable the individual to continue to live independently.
- (b) Providers shall not accept persons whose maintenance and care needs cannot be adequately met by the agency in the clients' place of residence.

**§306.5 Access to Services**

Area Agencies may receive requests for services from a variety of sources, which may include, but are not limited to the following types. Older persons may request services or be referred by a physician, hospital, case manager, family member, friend, or other service provider. The Area Agency on Aging shall screen all applicants for service. Subject to the availability of the service, area agencies will initiate services, if providing directly; or refer appropriate applicants to contract provider organizations or other resources; or place them on a waiting list for services.<sup>2</sup>

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<sup>1</sup> Eligible funds sources are Older Americans Act, Title III-B and Title III-E (supplemental services); the Social Services Block Grant; the State Home and Community Based Services Program.

<sup>2</sup> The Area Agency is responsible for providing notice to applicants of the disposition of their requests for service. Subcontractors are responsible for providing notice of service status to persons once they have been referred for service and a case manager or provider staff has conducted the face-to-face assessment. Suggested forms have been provided under separate cover.

When available, services will be provided in the client's place of residence. Services shall not be provided in a nursing home, personal care home or other setting where the provision of this service is included in the cost of care.

**§306.6 Service Activities**

Service activities include planned and routine provision of:

- (a) Housekeeping and home management activities:
  - (1) cleaning, including vacuuming, sweeping, mopping; cleaning bathroom fixtures; dusting; washing inside windows and cleaning blinds on windows if no climbing is required;
  - (2) laundry, including folding and storing clothing and linens;
  - (3) ironing and mending clothes and linens;
  - (4) washing, drying, and storing dishes and utensils;
  - (5) bagging and placing garbage in collection containers;
  - (6) making beds and changing linens (only while client is out of bed);
  - (7) shopping for household essentials, including assisting clients with economical purchasing, consistent with their budgets;
  - (8) assisting client in organizing household routines;
  - (9) performing necessary reading and writing tasks, if requested and indicated by client's inability to read due to physical/visual impairment or other inability to read and write;
  - (10) performing essential errands (obtaining food stamps, picking up prescriptions, posting mail, etc.);
- (b) Meal preparation:
  - (1) assisting in planning meals/menus that are appropriate for the older person's needs and are consistent with the Dietary Guidelines for Americans;
  - (2) preparing and serving meals; and
  - (3) using sanitary practices for handling, preparing and storing food.
- (c) Escort assistance. Accompanying a client on trips to obtain health care services and other necessary items and services. (Also see §306.7(b)(9), regarding transporting clients)
- (d) Client education. Instructing clients in ways to become self-sufficient in performing household tasks, when appropriate and beneficial.

**§306.7 Prohibited activities**

- (a) Homemakers shall not provide personal care services, unless they are trained to provide such services, the employing agency is licensed to provide such services, *and* the Area Agency is contracting with the employing agency for the provision of both homemaker and personal care services. The two services are reported separately.
- (b) Other activities which are prohibited are:
  - (1) Administering medications, either over-the-counter or prescribed or reminding clients to take medications;
  - (2) Providing household services not essential to the client's needs;
  - (3) Providing friendly visiting only;
  - (4) Providing therapeutic/health related activities that are appropriately performed by a licensed practical nurse, registered nurse or home health aide;
  - (5) Home repair;
  - (6) Yard maintenance;
  - (7) Moving heavy objects such as furniture and appliances;
  - (8) Performing services for members of the household other than the client;
  - (9) Transporting the client in the worker's or client's personal vehicle, unless the provider agency has proof through written verification that the employee has adequate and current liability insurance coverage.
  - (10) Performing tasks not ordered by the case manager in the care plan or assigned by a supervisor.

**§306.8 Service outcomes**

Service providers shall ensure that their services achieve the following outcomes.

- (a) Quality homemaker services are provided at reasonable cost.
- (b) Staff demonstrate sensitivity to clients' special needs, including nutrition needs, as described in the Dietary Guidelines for Americans, in order to provide quality services.
- (c) Services are designed to capitalize on the individual's remaining strengths, lessen the burden of impairment for older adults, or to lessen the burden of providing care.

- (d) Services are provided based on a plan individualized for each client's abilities and needs, in the manner and times promised.
- (e) The provider is able to expand service capacity and improve quality with additional revenue generated through voluntary contributions and client cost share, when applicable.

**§306.9 Exemption from  
State Licensure**

Providers of homemaker services are *not* subject to state licensure, *unless* the homemaker tasks are provided as a component of a service subject to licensure, such as personal care, companion sitter services, or in-home respite care. For additional information on state licensure, please refer to Section 200, §208, In Home Service Requirements.

**§306.10 Delivery  
characteristics**

Service providers will deliver services in the following manner.

- (a) Assessment. The delivery of service shall be planned and carried out in accordance with specific client needs as determined by the designated administrative or program staff during the in-home assessment, based on the use of the DON-R instrument and other specified instruments or inventories. The assessment is conducted by the Area Agency, care coordination/case management provider agency, or the service provider agency, depending upon the option exercised by the Area Agency. If conducted by case management or provider agency staff, assessments shall be completed within ten business days of receipt of the service referral from the AAA. The entity responsible for assessment shall provide written notice to applicants/clients whom they assess to inform them of their eligibility status for receiving services.
- (b) Service plan
  - (1) Designated staff shall begin developing the service plan, using a format provided or approved by DAS, with the client and/or family during the in-home assessment visit and document the final plan prior to initiating services. The plan, at a minimum, shall include:
    - (A) information which clearly links the services to be provided with the functional impairments documented by the DON-R and other instruments used to assess clients/caregivers.
    - (B) types of service required, tasks requested or indicated and the tasks to be performed;
    - (C) the expected days, times, frequency and expected duration of visits in the client's residence;
    - (D) names of assigned personnel, including supervisor's name;

- (E) estimated duration of the need for service;
  - (F) the stated goals and objectives of the service; and
  - (G) discharge plans.
- (2) When applicable to the condition of the client and the services to be provided, the service plan also shall include information on equipment needs and dietary and nutritional needs, including the need for referral to a registered dietician for individual nutrition screening, nutrition counseling and education.
  - (3) The service supervisor/case manager shall complete the service plan within seven working days of services being initiated in the residence. Plans are to be revised as necessary, and reviewed and updated by staff members involved in serving the client at a minimum at the time of each supervisory visit.
- (c) Service initiation.
- (1) The provider agency has the discretion to begin providing minimal levels of services in the home prior to the completion of the initial service plan.
  - (2) The agency shall initiate services within ten working days from the date of receiving the referral, and thereafter deliver them on a regular basis in accordance with the established service plan.
  - (3) The provider agency shall make a telephone or other contact within the first four weeks of service initiation to ensure client satisfaction, and annually thereafter for the duration of the service relationship.
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- (d) Supervisory/monitoring visits. The appropriate provider agency supervisory staff will make periodic visits to each client's residence, starting from the date of initial service, or as otherwise indicated by changes in the client's condition or circumstances. The first supervisory visit will be made within 30 days of the end of the first 184 days (six months) of service delivery and every 6 months thereafter. The visits are made to ensure that the needs of the client are being met; to assure that the homemaker is performing tasks according to the service plan; to assure that the client is cooperating with and benefiting from the care plan; and to remedy any areas of deficiency. Supervisors also shall observe and note the appropriateness of the level of services being provided.

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- (e) Reassessment. Depending upon the options exercised by the Area Agency for providing for client assessment, designated Area Agency, case management agency, or provider staff shall reassess each client annually at a minimum, or as otherwise indicated.
- (1) Designated staff responsible for assessment activities shall conduct reassessments, either when contact with the client indicates that needs have changed, or when service staff or other caregiver reports the client's needs have changed.
  - (2) The reassessment shall address changes in the cognitive, emotional, physical, functional, economic or physical/social environment in which the client lives, and be documented using formats specified or approved by the Division. Staff responsible for reassessment shall involve the homemaker aide staff in the process, by obtaining feedback from the aide regarding appropriateness of the service plan (tasks to be performed, scheduling, etc.); adequacy of supplies and equipment, and adjust the service plan accordingly.
- (f) Emergency contacts. Clients will furnish to the provider information on emergency contact persons, which the agency will maintain in the client record. If no emergency contact person is available, the provider shall list the local emergency response number (example: 911 service) if available in the area or a local law enforcement agency as the contact. The emergency contact person and phone number(s) shall be verified and updated at the time of reassessment.
- (g) Service Termination and Discharge.
- (1) The provider agency shall discontinue services:
    - (A) upon the death of the client, entry of the client into a nursing home, or when there is no longer a need for the service;
    - (B) when the client is non-compliant with the plan of care through persistent actions of the client or family which negate the services provided by the agency<sup>3</sup>, but only after all attempts to counsel with the client/family have failed to produce a change in behavior leading to compliance;

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<sup>3</sup> In cases of non-compliance, supervisory staff shall evaluate the need for referral for protective or mental health services and make such referrals as appropriate prior to discharge and termination, whenever possible.

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- (C) when the client or client's family threatens or abuses the in-home service worker or other agency staff to the point that the staff's welfare and safety are in jeopardy and good-faith attempts at corrective action have failed. Agency administrators shall use discretion and professional judgment in determining in which situations immediate removal of staff and termination of service are necessary.
  - (D) when the provider agency resources are inadequate to continue to meet the maintenance needs of the client.
  - (E) upon the request of the client, or the caregiver when acting as the client's authorized representative.
- (2) The provider agency shall provide written notice of termination and discharge at least 21 calendar days prior to the date of discharge, when applicable.
  - (3) During the 21-day period, the provider shall work with the Area Agency and/or case management provider to make appropriate arrangements with the client and/or family for transfer to another agency, institutional placement or other appropriate care.
  - (4) The provider shall continue to provide care in accordance with the service plan for the 21 days or until alternate arrangements can be made, whichever occurs first, unless continuing to provide services would place the homemaker aide at risk of being harmed.

#### §306.11 Staffing <sup>4</sup>

Providers of homemaker services shall have sufficient numbers of qualified staff, as required by the Department of Human Resources rules and regulations and/or the Division of Aging Services service requirements, to provide services specified in the service agreements with clients.

- (a) Minimum qualifications for service supervisors: A high school diploma or General Equivalency Diploma (GED) plus at least one year of full-time employment in a social or human service agency in a direct service or supervisory position. Supervisors shall have experience in housekeeping, home management and meal planning and preparation activities.
- (b) Desired qualifications for service supervisors: successful completion of at least two years of full time study in social or behavioral sciences at an accredited college or university, and supervisory experience.
- (c) All homemakers shall meet the following minimum qualifications:

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<sup>4</sup> If the provider agency also is licensed by the state to provide personal in-home services, the same staff which provides personal care also may provide homemaker assistance to aging program clients, in accordance with these requirements, as long as the Area Agency specifically contracts with the provider agency for both services.

- (1) be 18 years of age or older;
- (2) have the ability to follow oral and written instructions and keep simple records;
- (3) have experience in providing care to aged or disabled adults;
- (4) have experience or receive training in each service activity.
- (5) be free of communicable/infectious disease and be able to provide certification of health status and fitness to perform duties; and
- (6) never have been shown by credible evidence (findings of a court or jury, criminal records check, departmental investigation or other reliable source) to have abused, neglected, sexually assaulted, exploited or deprived any person or to have subjected any person to a serious injury as a result of intentional or grossly negligent misconduct.
- (7) successful completion of orientation and training. See §306.12(b) for minimum training content.

**§306.12 Orientation and training requirements.**

The homemaker service agency shall provide services, employing personnel who meet the qualifications and possess competencies to perform the services requested and agreed upon by the client or family. The agency shall arrange or provide core training to homemakers prior to assigning them to work with clients. Core training consists of all topics covered in the orientation {§306.12(a)} and any of the topics covered in {§306.12(b)} that personnel would need in order to begin a specific work assignment, with the understanding that the training on the remaining topics would be completed within the first year of employment.

- (a) The provider agency is responsible for the following:
  - (1) providing an orientation for personnel to their job responsibilities including, but not limited to:
    - (A) agency policies and procedures
    - (B) orientation to the aging network and philosophy of community-based services
    - (C) recognizing and reporting suspected abuse, neglect, and/or exploitation;
    - (D) change in the client's health condition requiring emergency procedures or health services;
    - (E) agency code of ethics and employee conduct;
    - (F) client rights and responsibilities;



- (G) the complaint handling process;
    - (H) recognizing and reporting client progress and problems to supervisory staff, channels of communication;
    - (I) the employee's obligation to inform the employer of known exposure to tuberculosis and hepatitis, or any other communicable disease.
  - (2) maintenance of documentation to demonstrate that an individual is able to perform the services for which s/he is responsible;
  - (3) assuring that the staff responsible for directing/providing training are qualified to provide such instruction.
  - (4) for requiring each employee to participate in at least eight clock hours annually of in-service or additional training as appropriate.
- (b) The provider agency may provide the training or assist employees in locating and attending the appropriate training. The objective of additional training is to improve each employee's ability to meet the needs of the client and support the accomplishment of service outcomes. Specific training content for homemaker service staff includes, but is not limited to:
- (1) Basic communications skills (1 hour minimum)
  - (2) Family relationships (1 hour minimum)
  - (3) The aging process (1 hour minimum)
  - (4) Working with elderly/disabled adults: understanding impairments in Activities of Daily Living and Independent Activities of Daily Living (1 hour minimum)
  - (5) Working with persons with cognitive impairments, including Alzheimer's disease (1 hour minimum)
  - (4) Nutrition: (4 hours minimum)
    - (A) planning, purchasing, serving food
    - (B) basic principles of adult nutrition
    - (C) meal planning
    - (D) food management
    - (E) modified and therapeutic diets

- (5) Cleaning and care tasks in the home (3 hours minimum)
  - (A) appropriate use and care of household equipment and appliances;
  - (B) laundering methods and stain removal techniques;
  - (C) kitchen/bathroom cleaning
  - (D) home safety
  - (E) safe storage of household cleaning products
  - (F) infection control, including instruction on universal precautions, if appropriate.<sup>5</sup>
- (6) The provider agency shall instruct each homemaker on procedures for obtaining emergency health care assistance for clients, should such occasions arise, and specify the agencies to be contacted in each municipality/ county served.

**§306.13 Administrative requirements**

- (a) The provider shall establish and implement written policies and procedures that define the scope of the homemaker services it offers and the type of clients it serves.
- (b) Provider agencies shall maintain accurate administrative, fiscal, personnel, and client case records that shall be accessible and available to authorized representatives of the area agency on aging, the Division of Aging Services, the Department of Human Resources, and others as required or authorized by law.
- (c) Providers will assure that all prospective employees are screened through the criminal records investigation process.<sup>6</sup>
- (d) Service agreements. No provider shall offer to contract for or provide a client any homemaker service that it cannot reasonably expect to deliver.
  - (1) Each provider shall develop and implement policies and procedures for service agreements. All services provided to a client shall be based on a written service agreement entered into with the client or the client's responsible party. The agreement shall include:

<sup>5</sup> Universal precautions are measures taken to prevent transmission of infection from contact with blood or other body fluids or materials containing blood or other body fluids, as recommended by the U.S. Public Health Service (USPHS) Centers for Disease Control and adopted by the U.S. Occupational Safety and Health Administration as 29 CFR 1910.1030

<sup>6</sup> Georgia Department of Human Resources Human Resource/Personnel Policy #504, O.C.G.A. §35-3-38, §49-2-14, and §31-7-350 *et seq.*; Criminal Code of Georgia O.C.G.A., Title 16; Code of Federal Regulations 42, IV, §438.420 (d) (1) (iii).

- (A) Date of referral (date on which the provider received the specific request to deliver a specific in-home service or services to a particular client;)
- (B) Date the provider makes initial contact with the client for services;
- (C) Description of services/activities needed, as stated by the client or responsible party;
- (D) Description of the services to be provided, staff to be assigned, and the expected duration and frequency of services;
- (E) Agency charges for services rendered (if applicable), and whether the charges will be paid in full or in part by the client or family; methods of billing and payment;
- (F) Any special arrangements required for providing cleaning supplies, equipment, and /or appliances.
- (G) Information regarding the client's/family's opportunity to contribute voluntarily toward the cost of services;
- (H) Client's acknowledgment of receipt of "Client's Rights and Responsibilities" written notification. See Appendix 306-A for listing of rights and responsibilities;
- (I) A telephone number for the provider which the client can call for information, questions, or to file complaints about the services supplied by the provider and information regarding supervision by the agency of the services to be provided;
- (J) Written authorization from the client or responsible party for access to the client's personal funds when services include assistance with bill paying, or any activity, such as shopping, that involve access to or use of such funds; authorization for use of client's motor vehicle when services to be provided include transport and escort services and when the client's personal vehicle will be used;
- (K) Signatures of the provider's representative and the client or responsible party and date signed; or in the case of refusal to sign, such refusal shall be noted on the agreement with an explanation from the provider's representative.

- (2) Providers shall complete service agreements for new clients *not later than the second visit to the client's residence to provide services, or not later than seven calendar days after services initially are provided in the residence, whichever date is earlier.* If unable to complete the service agreement for good cause, provider staff will document the reasons in the client record. Subsequent revisions to the initial service agreement may be indicated by the provider noting in the client record the specific changes in service (e.g. addition, reduction or deletion of services; changes in duration, frequency or scheduling; changes in charges for service) that will occur, documentation that changes were discussed with and agreed to by client/responsible party, who signed the initial agreement prior to the changes occurring.
  - (3) The client, or his/her representative, has the right to cancel any service agreement at any time and shall be charged only for actual services rendered prior to notifying the provider of cancellation. The provider may assess a reasonable charge for travel and staff time if notice of cancellation is not provided in time to cancel a previously scheduled home visit for service delivery.
- (e) The provider agency shall maintain appropriate and adequate liability coverage on all employees who are connected with the delivery and performance of homemaker services in clients' homes.
- (f) The provider agency shall furnish adequate identification (ID) to employees of the provider.
  - (1) Each employee shall carry the ID and present it to the client/caregiver upon request.
  - (2) An adequate ID is one that is permanent in nature and which shows the provider agency name, employee's name, title, and a photograph of the employee.
  - (3) The provider shall issue the ID at the time of employment and shall require the return of the ID from each employee upon termination of employment.
- (g) The provider agency shall ensure that no homemaker services direct care worker is a member of the immediate family<sup>7</sup> of the client/caregiver being served by that worker.

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<sup>7</sup> Immediate family is defined as a parent; sibling; child by blood, adoption, or marriage; spouse; grandparent; or grandchild.

- (h) Each provider agency shall establish and enforce a code of ethics and employee conduct which is distributed to all employees and clients/families. The code of ethics shall provide for workers' use of bathroom facilities, and with the clients' consent, allow workers to eat lunch or snacks, provided by the workers, in the clients' homes. The code of ethics shall include, at a minimum, prohibitions regarding:
  - (1) Consumption of clients' food or drink, except for water.
  - (2) Use of clients' telephone for personal calls.
  - (3) Discussion of one's own or other's personal problems, religious or political beliefs with the client.
  - (4) Bringing any other persons, including children, not involved in providing services to the clients' homes.
  - (5) Solicitation or acceptance of tips, gifts or loans, in the form of money or goods for personal gain from clients or their families.
  - (6) Consumption of alcoholic beverages, or use of medicines or drugs for any purpose, other than medical, in the clients' homes, or prior to being present in the home to provide services.
  - (7) Smoking in clients' homes.
  - (8) Breach of the clients'/caregivers' privacy and confidentiality of information and records;
  - (9) Purchase of any item from the client/caregiver, even at fair market value.
  - (10) Assuming control of the financial or personal affairs, or both, of the client or his/her estate, including power of attorney or guardianship.
  - (11) Taking anything from the client's home.
  - (12) Committing any act of abuse, neglect or exploitation.
- (i) Agency Administrator. The agency shall employ a staff person who shall have full authority and responsibility for the operation of the organization. This person may also directly supervise homemaker staff.
- (j) Record keeping.
  - (1) Client records. Providers shall maintain separate files, in a manner specified or approved by the Division, containing all written records pertaining to the services provided for each client served, including, at a minimum, the following:

- (A) Assessment and reassessment documentation,<sup>8</sup> using instruments or inventories specified or approved by the Division of Aging Services;
  - (B) Identifying information including the name, address, telephone number of the client/responsible party, if applicable;
  - (C) Current service agreement;
  - (D) Current service plan;
  - (E) Documentation of tasks performed by staff.
  - (F) Documentation of findings of home supervisory visits unless reflected in the service plan.
  - (G) Any material reports from or about the client that relate to the care being provided, including items such as progress notes and problems reported by employees of the provider agency; communications with personal physicians or other health care providers; communications with family members or responsible parties, and any other pertinent information.
  - (H) The date of the referral.
  - (I) Any and all additional information requested or required by the Division.
- (2) Retention and confidentiality of client records.
- (A) Providers shall establish and implement written policies and procedures for the maintenance and security of client records, specifying who shall supervise the maintenance of records; who shall have custody of records; to whom records may be released and for what purposes. {Also see §306.13(j)(2)(C).}
  - (B) At a minimum, providers shall retain client records for five years from the date of the last service provided.

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The core assessment instrument for non-Medicaid Home and Community Based Services is the Determination of Need-Revised (DON-R) instrument. Use of additional tools, including, but not limited to the Nutrition Screening Initiative DETERMINE Checklist (NSI-D), the Folstein Mini-Mental Status Exam (MMSE), and the Center for Epidemiological Studies Depression Scale (CESD) also may be indicated in order to complete a comprehensive client assessment.

- (C) Providers shall maintain the confidentiality of client records. Employees of the provider shall not disclose or knowingly permit the disclosure of any information in a client record except to other appropriate provider staff; staff of other service provider agencies, on a need to know basis, including case managers from case management agencies who are coordinating all services for clients; the client; the responsible party (if applicable); the client's physician or other health care provider; the Department of Human Resources; the Division of Aging Services; other individuals authorized by the client in writing, or by subpoena.
- (3) Personnel records. Providers shall maintain separate written records for each employee, including the following:
  - (A) Identifying information: name, address, telephone number, emergency contact person(s);
  - (B) Employment history for previous five years or complete history if the person has not been employed for five years;
  - (C) Documentation of qualifications;
  - (D) Documentation of a satisfactory tuberculosis screening test upon employment and annually thereafter;
  - (E) Date of employment;
  - (F) Individual job descriptions or statements of persons' duties and responsibilities;
  - (G) Documentation of completion of orientation and training requirements.
  - (H) Documentation of an annual employee performance evaluation, at a minimum; and
  - (I) Documentation of bonding if employee performs functions which permits access to the client's personal funds. If bonding is provided through a universal coverage bond, the provider need not maintain documentation separately in each personnel file.
- (4) Reports of complaints and incidents. Providers shall maintain:
  - (A) files of all documentation of complaints submitted in accordance with Rules and Regulations of the State of Georgia;

- (B) all incident reports or reports of unusual occurrences (falls, accidents, etc.) that affect the health, safety and welfare of the clients, for a minimum of five years;
- (C) documentation of action taken by the provider to resolve clients' complaints and to address any incident reports or unusual occurrences.

**§306.14 Mandatory reporting of suspected abuse, neglect, or exploitation.**

All homemaker services staff are mandated reporters according to state law <sup>9</sup> and shall be familiar with and shall be able to recognize situations of possible abuse, neglect, exploitation or likelihood of serious physical harm involving service recipients. Staff are responsible for reporting suspected abuse, neglect or exploitation to the appropriate law enforcement agency, prosecuting attorney, or county department of family and children services. The provider agency shall establish procedures for homemaker staff to report suspected abuse, neglect or exploitation through appropriate supervisory channels.

**§306.15 Service Availability**

Providers of homemaker services shall assess the needs of the communities in which services are provided to determine the extent to which consumers need services outside of regular business hours, on weekends and on holidays, and develop plans to provide services accordingly. Providers may establish differential unit costs for services provided outside of core agency hours, if such service actually results in an increased cost to the agency.

**§306.16 Provider Quality Assurance and Program Evaluation**

- (a) The Area Agency on Aging shall assure that each agency providing homemaker services develops and implements an annual plan to evaluate and improve the effectiveness of program operation and services to ensure continuous improvement in service delivery. The provider agency shall involve direct care workers and supervisory staff in this process and in the development of improvement goals and strategies.
- (b) The process shall include, but not be limited to:
  - (1) a review of the existing agency's operations;
  - (2) satisfaction survey results from care receivers,(and caregivers, if present), and job satisfaction surveys from staff ;
  - (3) program modifications made that respond to changing needs of care receivers, caregivers, and staff.
  - (4) proposed program and administrative improvements.

<sup>9</sup>

O.C.G.A. 30-4, Protection of Disabled Adults and Elder Persons



- (c) Each contracting organization shall prepare and submit annually to the AAA a written report which summarizes the evaluation findings, improvement goals and implementation plan. The report shall be submitted no later than the end of the first quarter of the new fiscal year (September 30).

**§306.17 Fiscal Management**

Contractors providing homemaker services shall practice sound and effective fiscal planning and management, financial and administrative record keeping and reporting. Contractors will use the Division's Uniform Cost Methodology on an annual basis to analyze, evaluate and manage the costs of the program.

**§306.18 Monitoring, evaluation and quality assurance.**

The Area Agency on Aging and the Division of Aging Services periodically will monitor and evaluate homemaker service program performance to determine the degree to which defined program outcomes and objectives, and individual client outcomes, have been or are being accomplished. The Area Agency shall monitor for compliance with these requirements and evaluate contract agency performance on at least an annual basis. The Area Agency shall provide written feedback to contractors and technical assistance for continuous quality improvement. The AAA will take into consideration the findings of the contractor's self-evaluation.

**Effective Date:**

Upon Issuance. AAAs shall assure that providers subject to the requirements receive copies of this chapter in a timely manner and shall allow providers a reasonable period of time to make adjustments to comply.

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**Appendix 306-A**  
**Client Rights and Responsibilities**  
**and**  
**Complaint Resolution**

Providers of homemaker services shall establish and implement written policies and procedures outlining the rights and responsibilities of clients. Client rights and responsibilities include:

1. The right to be informed about the plan of service and to participate in the planning process.
2. The right to be promptly and fully informed of any changes in the plan of service.
3. The right to accept or refuse service.
4. The right to be fully informed of the charges for service, if applicable.
5. The right to be informed of the name, business telephone number and business address of the person supervising the services and how to contact that person.
6. The right to be informed of complaint procedures; the right to submit complaints without fear of reprisal; and the right to have complaints investigated within a reasonable period of time. The complaint procedure shall include the name, business address, and telephone number of the person designated by the provider to handle complaints and questions.
7. The right of confidentiality of client records.
8. The right to have one's person, property and residence treated with respect.
9. The right to obtain from the provider agency written notice of the address and telephone number of the Area Agency on Aging and the Division of Aging Services.
10. The responsibility of the client, and any responsible party, to advise the provider of any changes in the client's condition, or any events which affect the client's/caregiver's service needs.

**Complaint resolution:**

Providers shall describe in writing the manner in which complaints are to be addressed and resolved. Policies shall include procedures for clients and others to present complaints about services, either orally or in writing. Procedures also shall indicate that complaints will be addressed and resolved in a timely manner. The provider shall supply all clients and responsible parties with the specific telephone number of the provider, for information, questions or complaints about services being delivered.